CA PREP RFA #11-10407 ATTACHMENT 5

## INSTRUCTIONS FOR LOCAL STAKEHOLDER COALITION MEMBER LETTER OF COMMITMENT

Applicants must include a letter of commitment from each member of the Local Stakeholder Coalition.

The letter must be on the stakeholder's official letterhead and must include all of the following:

- The date the letter is signed.
- 2. Local Stakeholder Coalition member information:
  - The name of the organization being represented on the coalition
  - The name and title of the representative attending coalition meetings
  - The mailing address and physical address (if different from mailing) of the organization
  - The telephone number and email address of the representative attending coalition meetings.
- 3. A brief description of the following content must be addressed completely in the body of the letter of commitment:
  - The stakeholder's experience working with adolescents at risk for pregnancy, STIs, and HIV/AIDS within the county
  - The stakeholder's experience supporting comprehensive sexual health education
  - How long the stakeholder has been affiliated with the applicant and in what capacity
  - How the stakeholder participated in the development of the CA PREP RFA application
  - How the stakeholder will contribute to the promotion of healthy social norms within the community over the course of the CA PREP
- 4. Include the following statement in the closing paragraph:
  - I, (<u>local stakeholder coalition member's name</u>), submit this letter to demonstrate (<u>stakeholder organization</u>)'s on-going commitment to, and support of, the CA PREP teen pregnancy prevention efforts of (<u>applicant organization</u>).
- 5. The letter of commitment must be signed in blue ink, and the printed/typed name and title of the coalition member must be included below the signature.

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## LOCAL STAKEHOLDER COALITION MEMBER LETTER OF COMMITMENT

[Submit on Stakeholder Letterhead]	
[Insert Date]	
Organization/Agency Name	
Coalition Member's Name and Title	
Mailing Address (street or P.O. Box, city, zip code)	
Physical Address (if different than above)	
Contact Phone Number	
Contact Email Address	
<ol> <li>Provide a brief description of your organization's experience working with adolescents at risk for pregnancy, STIs, and HIV/AIDS within the county.</li> </ol>	
2. Describe your experience in supporting comprehensive sexual health education.	

3.	How long have you been affiliated with the applicant?  In what capacity?
4.	Describe your participation in developing the CA PREP RFA application.
5.	Describe how you or your organization will contribute to the promotion of healthy social norms within your community over the course of the CA PREP.
<u>(s</u>	(local stakeholder coalition member's name), submit this letter to demonstrate stakeholder organization)'s on-going commitment to, and support of, the CA PREP teen pregnancy revention efforts of (applicant organization).
Sincerely,  [Please sign in blue ink]	
L.	

Print/Type Coalition Member's Name and Title